## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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Commissioner for Patents
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	indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
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INSTRUCTIONS: This for appropriate. All further confining indicated unless corrected maintenance fee notification	respondence including the	nsmitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and rot iders and not i) specifying	PUBLICATION FEE (if re ification of maintenance fee: a new correspondence addre	quired). Blocks 1 through s will be mailed to the cur- ess; and/or (b) indicating a	5 should be completed where rent correspondence address as separate "FEE ADDRESS" for		
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20350 75	90 04/03/2006			papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
TOWNSEND AN	ND TOWNSEND A	ND CREW, L	LP					
TWO EMBARCA	DERO CENTER			States Postal Service addressed to the M	e with sufficient postage for [ail Stop ISSUE FEE addr	first class mail in an envelope		
EIGHTH FLOOR SAN FRANCISCO	CA 04111 2024			transmitted to the U	SPTO (571) 273-2885, on the	ne date indicated below.		
SAN FRANCISCO	), CA 94111-3634					(Depositor's name)		
						(Signature)		
						(Date)		
APPLICATION NO.	APPLICATION NO. FILING DATE			D INVENTOR	ATTORNEY DOCKET NO	D. CONFIRMATION NO.		
10/676,717	09/30/2003		Paul	Blair	3445			
TITLE OF INVENTION: SY	YSTEMS AND METHODS	FOR STAGING T	RANSACTI(	ONS, PAYMENTS AND CO	LLECTIONS			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	07/03/2006		
EXAM	INER	ART UN	IT	CLASS-SUBCLASS				
REAGAN,	JAMES A	3621		705-050000	_			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, and Crew LLP								
			(2) the name of a single firm (having as a member a 2					
"Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.	ion (or "Fee Address" Indica or more recent) attached. Use	ation form e of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)		<del></del>		
PLEASE NOTE: Unless	an assignee is identified be	low, no assignee	lata will app	ear on the patent. If an assi	gnee is identified below, the	e document has been filed for		
(A) NAME OF ASSIGNI		of this form is NOT	data will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)					
First Data Co	rporation		Engle	wood, Colorado				
Please check the appropriate	assignee category or catego	ries (will not be pri	nted on the pa	atent): 🔲 IndividualXX	Corporation or other private	group entity Government		
a. The following fee(s) are	enclosed:	4b.	Payment of	Fee(s):				
Issue Fee			A check in the amount of the fee(s) is enclosed.					
Publication Fee (No sr	nall entity discount permitte		Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies								
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a. Applicant claims SN			b. Application Foo (if on	ant is no longer claiming SM	ALL ENTITY status. See 37	CFR 1.27(g)(2).		
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Authorized Signature	/darin j gibl	by/		Date	June 22, 2006			
Typed or printed name	Darin J. Gibl	ру		Registration	No. 38,464			
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